



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 4227

SERIAL NUMBER 09/885,436	FILING DATE 06/18/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 09752-091001
<b>APPLICANTS</b> Jason F. Hunzinger, Carlsbad, CANADA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/213,213 06/21/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 08/13/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CANADA	SHEETS DRAWING 3	TOTAL CLAIMS 116
Verified and Acknowledged Examiner's Signature	Initials	INDEPENDENT CLAIMS 19		
<b>ADDRESS</b> SCOTT C. HARRIS Fish & Richardson P.C. Suite 500 4350 La Jolla Village Drive San Diego ,CA 92122				
<b>TITLE</b> Communication of location information in a wireless communication system				
FILING FEE RECEIVED 3718	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 4227

SERIAL NUMBER 09/885,436	FILING DATE 06/18/2001 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 09752-091001
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**APPLICANTS**

Jason F. Hunzinger, Carlsbad, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLN CLAIMS BENEFIT OF 60/213,213 06/21/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE****GRANTED \*\* 08/13/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	3	116	19
Verified and Acknowledged	Examiner's Signature      Initials				

**ADDRESS**

SCOTT C. HARRIS  
Fish & Richardson P.C.  
Suite 500  
4350 La Jolla Village Drive  
San Diego ,CA 92122

**TITLE**

Communication of location information in a wireless communication system

FILING FEE RECEIVED 4018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 4227

Bib Data Sheet

SERIAL NUMBER 09/885,436	FILING DATE 06/18/2001 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 09752-091001
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**APPLICANTS**

Jason F. Hunzinger, Carlsbad, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/213,213 06/21/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/13/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 116	INDEPENDENT CLAIMS 19
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

27572

**TITLE**

Communication of location information in a wireless communication system

FILING FEE RECEIVED 4018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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